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**To:**

NAME:	FACSIMILE:	TELEPHONE:
US Patent and Trademark Office MS Amendment	703-872-9306	

**FROM:** Stephen C. Durant, Reg. No. 31,506**DATE:** December 23, 2004**Number of pages with cover page:** 34**Originals Will Not Follow**Preparer of this slip has confirmed that facsimile number given is correct: 10345/lsg1**CAUTION - CONFIDENTIAL**

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**Comments:**

Attorney Docket No.: 404332000200

Group Art Unit: 2171

Examiner: P. J. D. Santos

Application No.: 09/747,602

Filed: 12/22/00

Title: MULTI-DIMENSIONAL RECURSIVE WAVEFRONT BEHAVIORIAL SYNTHESIS  
(As Amended)

Inventor: Kent Gilson

**Enclosed are the following documents:**

1. Transmittal (1 page)
2. Fee Transmittal in duplicate (2 pages)
3. First Supplemental Amendment - Adding New Claims 28-70 (30 pages)

**Comments: Please acknowledge receipt.****BEST AVAILABLE COPY**

sf-1842404

PTO/SB/21 (09-04)


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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	09/747,602
		Filing Date	December 22, 2000
		First Named Inventor	Kent GILSON
		Art Unit	2171
		Examiner Name	P. J. D. Santos
Total Number of Pages in This Submission	33	Attorney Docket Number	404332000200

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form - In duplicate - 2 pages <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment (First Supplemental Amendment-Adding New Claims 28-70) - 30 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Fax Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)		
Signature			
Printed name	Stephen C. Durant		
Date	December 23, 2004	Reg. No.	31,506

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below.	
Dated: December 23, 2004	Signature: <u>Loretta Garcia</u> (Loretta Garcia)

sf-1842386

PTO/SB/17 (12-04)

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<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4010).</p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		<p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>09/747,602</td></tr> <tr><td>Filing Date</td><td>December 22, 2000</td></tr> <tr><td>First Named Inventor</td><td>Kent GILSON</td></tr> <tr><td>Examiner Name</td><td>P. J. D. Santos</td></tr> <tr><td>Art Unit</td><td>2171</td></tr> <tr><td>Attorney Docket No.</td><td>404332000200</td></tr> </table>		Application Number	09/747,602	Filing Date	December 22, 2000	First Named Inventor	Kent GILSON	Examiner Name	P. J. D. Santos	Art Unit	2171	Attorney Docket No.	404332000200
Application Number	09/747,602														
Filing Date	December 22, 2000														
First Named Inventor	Kent GILSON														
Examiner Name	P. J. D. Santos														
Art Unit	2171														
Attorney Docket No.	404332000200														
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)    2,075.00															

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
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<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

<b>2. EXCESS CLAIM FEES</b>		
Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
69	28	43	25.00	1,075.00	
				Fee (\$)	Fee Paid (\$)
					0

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
26	16	10	100.00
		x	1,000.00

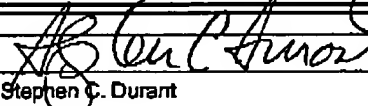
  

<b>3. APPLICATION SIZE FEE</b>			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
	- 100 =	/50	(round up to a whole number) x
			Fee Paid (\$)

<b>4. OTHER FEE(S)</b>	
Non-English Specification, \$130 fee (no small entity discount)	
Other: _____	
Fees Paid (\$)	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	31,506
Name (Print/Type)	Stephen C. Durant	Telephone	(415) 268-6982
		Date	December 23, 2004

sf-1842397

PTO/SB/17 (12-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete If Known</b>	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/747.602
		Filing Date	December 22, 2000
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		Art Unit	2171
TOTAL AMOUNT OF PAYMENT		(\$)	2,075.00
Attorney Docket No.		404332000200	

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>	
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<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments	

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Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
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Utility	300		500	250	200	100	
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Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
69	- 26 = 43	x 25.00 =	1,075.00			
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
26	- 16 = 10	x 100.00 =	1,000.00			

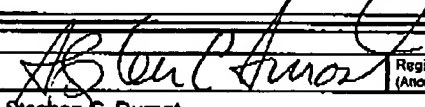
  

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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee Paid (\$)</u>
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<b>4. OTHER FEE(S)</b>		<b>Fees Paid (\$)</b>
Non-English Specification, \$130 fee (no small entity discount)		
Other:		

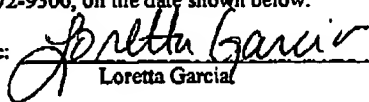
  

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	31,506
Name (Print/Type)	Stephen C. Durant	Telephone	(415) 268-6982
		Date	December 23, 2004

DEC 23 2004

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Dated : December 23, 2004 Signature:

  
Loretta Garcia

Docket No.: 404332000200  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of: Kent GILSON

Application No.: 09/747,602

Art Unit: 2171

Filed: December 22, 2000

Examiner: P. J. D. Santos

For: MULTI-DIMENSIONAL RECURSIVE WAVE-  
FRONT BEHAVIORIAL SYNTHESIS  
(As Amended)

**FIRST SUPPLEMENTAL AMENDMENT - ADDING NEW CLAIMS 28 - 70**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

This is a First Supplemental Amendment adding new claims. This Amendment is not submitted as a response to an office action.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 23 of this paper.

sf-1815223

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